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SERIAL NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO.
09/663,551	9/18//2000	Thompson Mark R.	019396-001400US

EXAMINER	
Wesner	Sajous
ART UNIT	PAPER NUMBER
2676	12/1/05

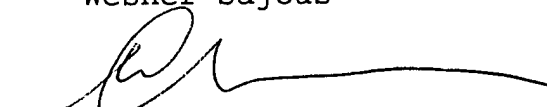
DATE MAILED:

Please find below a communication from the EXAMINER in charge of this application.

Commissioner of Patents

This is to acknowledged receipt of the Information Disclosure Statement filed on December 1, 2005. The reference has been acknowledged, and a copy of the signed and initialed 1449-Form is attached.

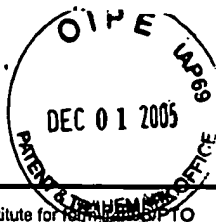
Wesner Sajous



January 12, 2006



MATTHEW C. BELLA
SUPERVISORY PATENT EXAMINER
TECHNOLOGY CENTER 2600



PTO/SB/08A (08-03)

Substitute for Form SB-01 PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)			Complete if Known		
			Application Number	09/663,551	
			Filing Date	September 18, 2000	
			First Named Inventor	Thompson, Mark R.	
			Art Unit	2676	
			Examiner Name	Wesner Sajous	
Sheet	1	of	1	Attorney Docket Number	019396-001400US

U.S. PATENT DOCUMENTS+						
Examiner Initials*	Cite No. ¹	Document Number		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code ² (if known)			
WS	AA	US-5,751,283		05/12/1998	Smith	
	AB	US-				
	AC	US-				
	AD	US-				
	AE	US-				
	AF	US-				
	AG	US-				
	AH	US-				
	AI	US-				
	AJ	US-				
	AK	US-				
	AL	US-				
	AM	US-				
	AN	US-				
	AO	US-				
	AP	US-				
	AQ	US-				
	AR	US-				
	AS	US-				
	AT	US-				

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code* (if known)				
	AU							<input type="checkbox"/>
	AV							<input type="checkbox"/>
	AW							<input type="checkbox"/>
	AX							<input type="checkbox"/>
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	AZ							<input type="checkbox"/>
	BA							<input type="checkbox"/>
	BB							<input type="checkbox"/>

Examiner Signature		Date Considered	1/12/06
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* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.